

MULTIPLE INVENTOR CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/540217

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	—					
2	—					
3	1					
4	—					
5	—					
6	—					
7	1					
8	—					
9	1					
10	1					
11	1					
12	1					
13	1					
14	1					
15	1					
16	1					
17	—					
18	—					
19	—					
20	—					
21	3					
22	—					
23	—					
24	1					
25	1					
26	1					
27	1					
28	1					
29	1					
30	—					
31	—					
32	1					
33	1					
34	1					
35	1					
36	1					
37	1					
38	1					
39	1	2				
40	2					
41	3					
42	1					
43	1					
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	8		↓		↓	↓
TOTAL DEP.	6		←		←	←
TOTAL CLAIMS	14					

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.			←		←	←
TOTAL CLAIMS						